

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	NO.	DATE
	F.F		05-01
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		10	5-21-01
FORMALITY REVIEW	MA	830	06/22/01
RESPONSE FORMALITY REVIEW	BE	897	01-09-02

INDEX OF CLAIMS

- ✓ Rejected
- = Allowed
- (Through numeral)... Canceled
- ⊖ Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected

Claim	Date
Final	
Original	
1	5/11/02
2	✓
3	✓
4	✓
5	✓
6	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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6/1/0